## Rabies Post-Exposure Prophylaxis Schedule-United States, 1999\*

Vaccination status	Treatment	Regimen**
Not previously vaccinated	Wound cleansing	All postexposure treatment should begin with immediate thorough cleansing of all wounds with soap and water. If available, a virucidal agent such as povidone-iodine solution should be used to irrigate the wounds (72).
	RIG	Administer 20 IU/kg body weight. If anatomically feasible, <b>the full dose</b> should be infiltrated around the wound(s) and any remaining volume should be administered IM at an anatomical site distant from the vaccine administration. Also, RIG should not be administered in the same syringe as vaccine. Because RIG might partially suppress active production of antibody, no more than the recommended dose should be given.
	Vaccine	HDCV, RVA, or PCEC 1.0 ml, IM (deltoid area <sup>†</sup> ), one each on days 0 <sup>‡</sup> , 3, 7, 14, and 28.
Previously vaccinated <sup>¶</sup>	Wound cleansing	All postexposure treatment should begin with immediate thorough cleansing of all wounds with soap and water. If available, a virucidal agent such as a povidone-iodine solution should be used to irrigate the wounds (72).
	RIG	RIG should <b>NOT</b> be administered.
	Vaccine	HDCV, RVA, or PCEC 1.0 ml, IM (deltoid area <sup>†</sup> ), one each on days $0^{\ddagger}$ and 3.

<sup>\*</sup> This table is from the Human Rabies Prevention-United States, 1999 Recommendations of the Advisory Committee on Immunization Practices document.

<sup>\*\*</sup> These regimens are applicable for all age groups, including children.

<sup>†</sup> The deltoid area is the only acceptable site of vaccination for adults and older children. For younger children, the outer aspect of the thigh may be used. Vaccine should never be administered in the gluteal area.

<sup>‡</sup> Day 0 is the day the first dose of vaccine is administered.

<sup>¶</sup> Any person with a history of preexposure vaccination with HDCV, RVA or PCEC; prior postexposure prophylaxis with HDCV, RVA, or PCEC; or previous vaccination with any other type of rabies vaccine and a documented history of antibody response to the prior vaccination.